APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

OFFICE USE ONLY

officer before opening the	e campa	ign account.						OFFICE	. USE	CITE	
CHECK APPROPRIATE Initial Filing of Form	BOX(E		reası	urer/Deputy	Deposito	ory 🔲	Office		Party		
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip code) 2605 West 12 Avenue						
Abdel Jimenez											
4. Telephone	elephone 5. E-mail address					Hialeah, FL 33010					
(305) 209-6393	abdeljimenez@hotmail.com										
6. Office sought (include district, circuit, group number)					7. If a candidate for a <u>nonpartisan</u> office, check if						
City of Hialeah Council Group 7					applicable: My intent is to run as a Write-In candidate.						
8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a											
Write-In No Party Affiliation Party candidate.											
9. I have appointed the following person to act as my 💢 Campaign Treasurer 🔲 Deputy Treasurer											
10. Name of Treasurer or Deputy Treasurer Abdel Jimenez											
11. Mailing Address					12. Telephone						
2605 West 10 Avenue							L	209-63	93		
13. City	14. County 15.			· I							
Hialeah Miami-Dade FL					33010 abdeljimenez@hotmail.com						
18. I have designated the following bank as my											
10. 10. 10. 10. 10. 10. 10. 10. 10. 10.					20. Address						
Apollo Bank					1255 West 49 Street						
21. City 22. County				23. State				24. Zip Code			
Hialeah	ialeah Miami Dade				FL				33012		
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.											
25. Date	S. Signature of Candidate										
04/01/2021 X					(The						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
ABDEL JIMENEZ , do hereby accept the appointment										t	
(Please Print or Type Name)											
designated above as: Campaign Treasurer Deputy Treasurer.											
04/01/20	/	Melle									
Date	Sign	ignature of Campaign-Freasurer or Deputy Treasurer									